



The Fortnightly
REVIEW

OF THE CHICAGO DENTAL SOCIETY

November 15, 1943



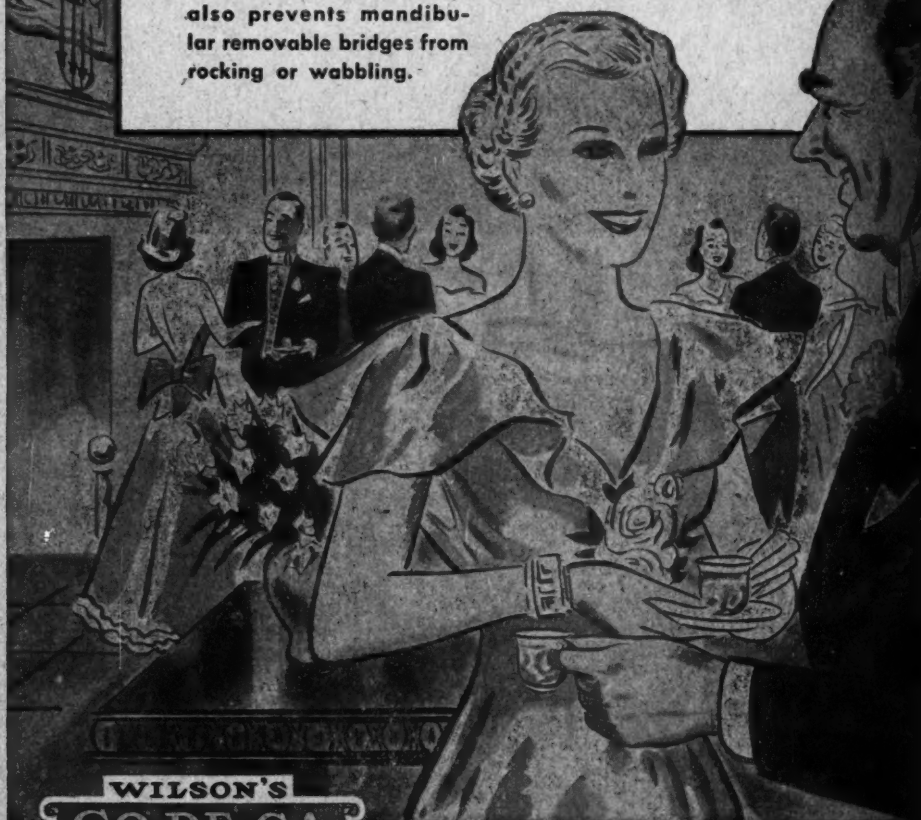
Volume 6 • Number 10

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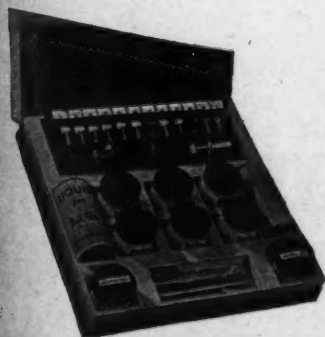


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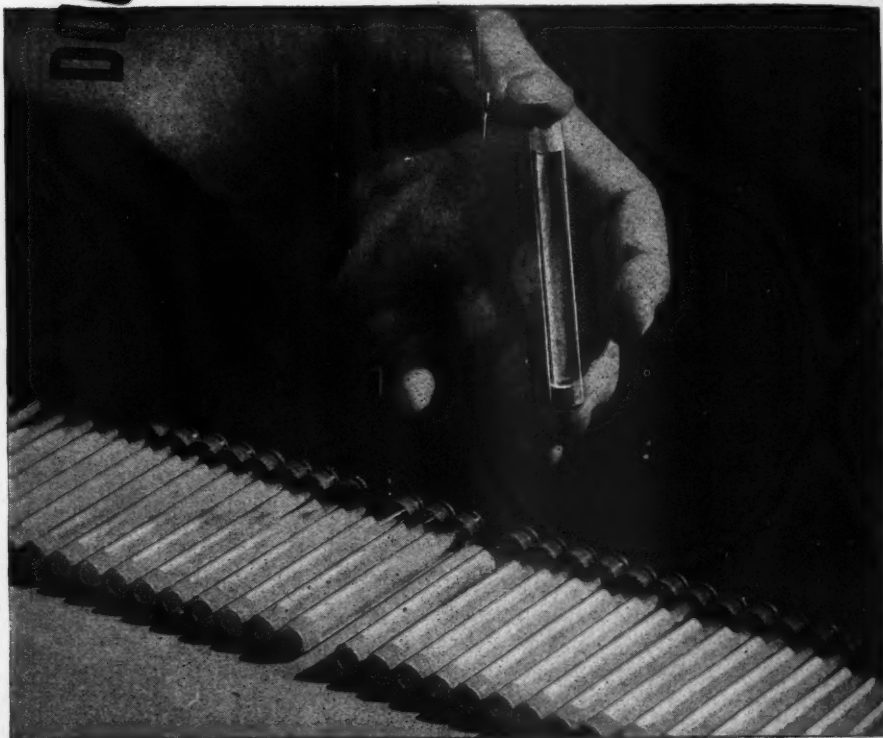
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Number 10

Nov. 15, 1943

Volume 6

| | |
|---|----|
| Military Night to Be Feature of Midwinter Meeting | 4 |
| North Suburban Clinic Day | 5 |
| Social Change and the Practice of Dentistry | 7 |
| News and Announcements | 8 |
| Editorial | 12 |
| Quotations and Abstracts | 15 |
| University of Illinois Bulletin | 16 |
| <i>X. The Use of Cathartics</i> | 17 |
| News of the Branches | 21 |
| The Society Directory | 26 |
| Ethics Committee | 26 |

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THE CALENDAR

- November 16th:** **Chicago Dental Society:** Regular monthly meeting to be held at the Palmer House. Dr. Howard C. Miller will discuss "Practical Procedures in Oral Surgery."
- November 17th:** **North Suburban Branch:** Annual Clinic Day. Orrington Hotel, Evanston. Manufacturer's Clinics 10:30 a.m.-5:30 p.m. Dental Health Luncheon 12:00. General Clinics and Essay Program 2:00 p.m.-5:00 p.m. Annual Banquet 6:30 p.m.
- November 19th:** **American College of Dentists (Illinois Section)** will meet at the Chicago Athletic Club, Dinner will be served at 6:30 followed by a business meeting at 8 p.m.
- November 30th:** **Banquet for Dr. Willis J. Bray:** Members are invited to attend a banquet in honor of Dr. Willis J. Bray, immediate Past-President of the Chicago Dental Society. 6:30 p.m. Top of the Town Restaurant, 185 North Wabash Avenue. Tickets at \$5.00 each may be reserved by calling Dr. Robert I. Humphrey, Dearborn 6950.
- December 1st:** **Xi Psi Phi (Chicago Alumni Chapter)** will meet at the Adventurers Club, 14 North Michigan Avenue. Dinner 6:30 p.m. For reservations call Dr. Frank A. Farrell, Vincennes 4343.
- December 6th:** **North Side Branch:** Regular monthly meeting, Edgewater Beach Hotel. Dinner at 6:30. Capt. F. F. Molt, U.S.N.R., will be the speaker.
- December 7th:** **Kenwood-Hyde Park:** Regular monthly meeting. Del Prado Hotel. "Acrylics" will be the subject of discussion.
- December 7th:** **South Suburban Branch:** Regular monthly meeting will be held at Harvey Elks' Club. Dinner at 6:30 p.m. Dr. Kenneth W. Penhale will speak on "Minor Oral Surgery."
- December 7th:** **West Suburban Branch:** Regular monthly meeting to be held at the Oak Park Club. Dr. Robert Blackwell will speak on "Operative Dentistry as the Foundation of Dentistry."
- December 14th:** **West Side Branch:** Regular monthly meeting to be held at Groetchen's Restaurant, 3929 West Madison Street. Dinner at 6:30. Meeting at 8 p.m.
- December 14th:** **Englewood Branch:** Old Timers' Night to be held at the Southmoor Hotel.

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Military Night to Add Luster to Midwinter Meeting High Ranking Officers Will Attend

The 1944 Midwinter Meeting of the Chicago Dental Society will be a three-day meeting instead of the usual four; the dates are February 21-23 and the meeting will convene at Chicago's Palmer House. None of the traditional features will be missing and some new ones will be added. Because the country is still in a state of war special emphasis will be placed on an all military night in celebration of Washington's Birthday. All of the high ranking officers of the Army and Navy Dental Corps have been invited to attend and acceptances have been received from most of them. For the first time in the history of the United States, a dentist has been made a major general and he, Major General Robert H. Mills, will participate in the program. Rear Admiral Alexander G. Lyle, Navy Dental Corps, Captain C. Raymond Wells, President of the American Dental Association and Chief Dental officer of the Selective Service System, Colonel Arno Brett, 6th Service Command, Captains J. Tartre and Frederick F. Molt, Great Lakes Naval Training Station, also will be among the guests. This celebration will be designated officially as the "Second General Session" and will be presided over by the inimitable "Jerry" Timmons.

FIRST GENERAL SESSION

The First General Session will be

held on Monday evening, instead of Monday morning as formerly. The winner of the Prize Essay Contest has always appeared at this session and, when it was held in the morning, the audience was disappointingly small. Holding this Session in the evening serves two purposes. First, it will give the contest winner an appropriate setting and, second, it will make it possible to advance those table clinics which previously were given on Thursday morning, thus saving half a day.

REGISTRATION

Chicago members will have an opportunity to register on Sunday, the day before the meeting, and are hereby urged to do so. The registration booth will be open from 2 to 5 p.m. and will have its full facilities in operation. The Board of Directors has announced a two dollar registration fee for all dentists who are not members of the Chicago Dental Society. This does not include the new class of "associate members," who have already paid their three dollars. The object of the registration fee is merely to provide the revenue necessary to keep the meeting up to its former standards. Heretofore sufficient funds have been provided through the sale of exhibit space but next year many of the manufacturers will be forced to curtail their

expenses and, besides, some of them will have nothing to sell.

PROGRAM HIGHLIGHTS

Under the guidance of the General Chairman, Mefford J. Couch, committees have been hard at work since the middle of August preparing for the 1944 meeting. Richard A. Smith is Chairman of the Program Committee, Arthur W. Blim has charge of the Essay Division, Reuben A. Anderson heads the General Clinic Division and G. Wolford Haley is chairman of the Limited Attendance Clinics Division. Upon these men has fallen the biggest share of the burden of whipping the program together. That they have done an excellent job is proven by the array of talent they have secured. There is only space enough here to tell of a few of the essayists and clinicians who have sent in their acceptances. *Intravenous Anesthesia* will be discussed pro and con by Berto A. Olson of Hollywood, California. Dr. Olson is one of the pioneers in this work and uses this type of anesthesia daily in his practice. However, it must be said that he has hospital facilities immediately at hand where his patients can recover their equilibrium in peaceful surroundings. *Jaw Fractures and the Different Methods of Treatment* will be covered by Douglas Parker of New York. This will be a very practical paper and will be profusely illustrated by lantern slides.

ORTHODONTIA AND CHILDREN'S DENTISTRY

Walter F. McFall and R. C. Willett are two of the names to conjure with in the Orthodontia and Children's Dentistry Section. Dr. McFall, he of the delightful southern drawl, will expatiate on problems in children's dentistry and Dr. Willett of Peoria, well known to all Chicago audiences, will call upon his wealth of experiences to explain how to prevent malocclusions. Practice Management will present the popular Harold Hillenbrand of Chicago, Assistant Editor

of the Journal of the American Dental Association. Dr. Hillenbrand will gaze into his crystal ball and attempt to forecast some of the social trends and implications in the future practice of dentistry. The Periodontia Section has secured such authorities as Edward L. Ball, of Cincinnati, Charles H. M. Williams of Toronto, David N. McLean of Los Angeles and M. K. Hine of Chicago, as contributors to its program. Researchers will attempt to come into their own by presenting the results of their recent studies. W. M. Krogman, Professor of Anthropology, University of Chicago, always an interesting speaker, will tell of his experiments with dog-breeding; with special reference to heredity in the head, face and teeth. R. M. Stephan and J. A. Muntz, of the Zoller Clinic, will report on infection and sterilization of dentine.

PARTIAL AND FULL DENTURES

Mouth reconstruction will be discussed by Ernest Granger of Mount Vernon, New York, in the Partial Denture, Crown and Bridge Section. In the Full Dentures Section, James H. Pearce is the sole Chicago representative, so far. He will let out a few secrets from his bag of tricks relative to immediate dentures. Walter E. Moyer of Denver, W. R. Dykins of Glen Lyon, Pennsylvania, and E. J. Lang of New Ulm, Minnesota, are some of the out-of-town men who will appear. Operative Dentistry will present such men as Robert Drake of Omaha, a gold foil expert, G. A. Stratton of Oshkosh, *Gold Inlays*, and Waldemar A. Link of Chicago, *Amalgam Restorations*.

LIMITED ATTENDANCE AND GENERAL CLINICS

The Limited Attendance Clinics Division has ranged the country from coast to coast to pick the stars in its firmament. Louis T. Austin will come from the Mayo Clinic to participate in the

(Continued on page 25)

North Suburban Branch to Hold Clinic Day Program to Cover All Phases of Dentistry

The North Suburban Branch will hold its Annual Clinic Day, Wednesday, November 17, at the Orrington Hotel, Evanston. Beginning at 10:00 a.m. and continuing on until 5:30 p.m., Manufacturers Clinics, Group Clinics, Army and Navy Clinics and Scientific Exhibits will vie with each other for the role of stellar attraction. Here in the quiet, soothing Evanston atmosphere one can drink of this fountain of knowledge without stint and, what's more, without being pushed around. Dr. Charles W. Freeman, Dean of Northwestern University Dental School, will be the speaker at the Oral Health Luncheon at 12 o'clock. He has chosen as his subject: "The Importance of Dental Health for the School Child." This luncheon is open to all persons interested in mouth health. The Essay Program will begin at 2:00 p.m. with a discussion of Senate Bill 1161, popularly known as the Wagner-Murray Bill, by Mr. Frank Whiston, Manager of the Pittsfield Building. He will be followed at 3:30 by Dr. L. S. Fosdick, Head of the Department of Chemistry, Northwestern University Dental School, who will discuss the latest knowledge concerning dental caries with special reference to the susceptibility test.

ARMY AND NAVY

The Army and Navy Dental Corps will send some of their ablest men to participate in the program. Capt. J. A. Tartre, D.C. U.S.N., Senior Dental Officer at Great Lakes Naval Training Station, with his accustomed graciousness, has spared no effort and is bringing along some of his best talent. All of his clinicians are outstanding in their specialties. Capt. W. O. Vopata, D.C., U.S.A., will represent the Army. He is stationed at Fort Sheridan and, owing to an acute shortage of personnel in the dental department, will be their sole

representative. He will be assisted by Sgt. Hal W. Howard and several enlisted men, who will act as patients. The Navy Clinics are as follows: Class 5-Gold Foils, Lt. Norman C. Carlson; Class 4-Precision Acrylic Inlays, Lt. Carl O. Schramm; Medical Radiology with the Dental Machine, Lt. (jg) Newell O. Feely; An Easy Way to Make Matrix B and Condensation of Amalgam, Lt. Merritt C. Pederson; Indirect Inlay Technic, Lt. R. H. Stearns; Central Relation, Lt. Le Roy Kurth; Apicoectomy Prior to Pulp Canal Filling, Lt. Harold O. Jones; Fractures of the Jaws, Lt. Raymond A. Kaddatz. During the afternoon the Navy will put on a Motion Picture Program consisting of a mixture of subjects of both scientific and general interest including the classic, "This Is Guadalcanal."

GROUP CLINICS

The three dental schools in Chicago will be well represented at Clinic Day, too. Group Clinics by advanced students under the supervision of a member of the faculty will fill the afternoon session from 2:00 to 5:30. The University of Illinois, College of Dentistry, will present the following clinicians: Root Filling Materials, Donald L. McElroy; Partial Dentures, M. B. Hattenhauer; Immediate Dentures, Paul Bostian; Caries Activity Test, Edward C. Wach and Joseph F. O'Donnell; Acrylic Appliances for Children, Elsie Gerlach. Northwestern University Dental School will offer the following group clinics: Control of Hemorrhage Following Extraction, Russell G. Boothe; Individuality in Porcelain Teeth by use of Mineral Stains, Clyde E. Shepherd; Lower Impression Technic for Complete Dentures, James E. Smith; Pulpotomy, Norman J. Wirth. Chicago College of Dental Surgery will put on four clinics: Surgical Preparation

(Continued on page 20)

Social Change and the Practice of Dentistry

PART I. SUMMARIES OF LECTURES

*Prepared by M. L. DOLLAR, B.A., Chicago, Ill.
Secretary of the Committee on Economics of the A.D.A.*

The lectures which are summarized in this article were presented in a series of conferences dealing with social changes and their relation to the practice of dentistry. The lectures were arranged under the auspices of the Englewood Branch of the Chicago Dental Society and were presented by members of the faculty in the Department of Social Sciences of the University of Chicago.

Lecture No. 1, "*Dentistry and the Changing Democracy*"—Joseph D. Lohman, B.A., M.A., *Department of Sociology*.

The purpose of the series of lectures to be presented on social change and the practice of dentistry is to broaden the perspective of the dental profession in order that problems of public health may be approached with an understanding of the social, as well as the medical, problems involved. Through acquiring a knowledge of the trends in our social development the profession will be in a position to formulate intelligently policies along national lines. It is emphasized that it will not be the purpose of these lectures to suggest what policies should be adopted with regard to the problems of public health.

In the lectures to follow, the term "socialization" will be used with reference to the profession. This term is not to be confused with political theories of socialism; rather, the term is to be used to describe the attitude of the profession itself as expressed through its organized efforts to protect the interests of dentistry and at the same time to protect the health interests of the public. So far no political or non-political group or agency has a formula for meeting

the health problem. Much will be gained by the profession if it will face squarely the problem of bringing adequate health services to all elements in the population.

Dentistry, as practiced today, can only be understood in the light of the social change that has taken place during the past few generations. The world has experienced a revolution in the techniques of production, moving from an economy based on hand labor to an economy based on the machine. The result has been a great division of labor that has segmented skills into highly specialized operations. Changes in technology have given rise to what may be termed a social revolution. In this process of change institutions have also changed but at a much slower rate than that of our technology. This has led to a lag of cultural elements in society behind technical developments. This cultural lag gives rise to conflict between old established institutions and our modern industrial and commercial organization. For example, the codes which operate in the market cannot be applied in the home. A deal which might be considered good business and smart operating in dealing with business competitors would be considered cheating if applied in dealing with members of one's own family. The medical profession has bridged the gap between social ethics and business interests by establishing a code of ethics which places the welfare of the patient above monetary consideration.

Growing democratization has raised the social status of the masses. The younger generation has been educated to have an appreciation for the better things in life. This has resulted in an insistence on their part that they be allowed to participate in the kind of a life that formerly was the privilege of

1. Lecture-conferences offered by the University of Chicago in cooperation with the Englewood Branch of the Chicago Dental Society. Reprinted from *J. Am. Col. Dent.*, June, 1943, P. 112.

only the upper classes in society. These demands on the part of the masses lead to conflict with older institutions which recognize class differences. These demands of the younger generation for a degree of social equality are to an extent being met. The New Deal has, in a fumbling way, attempted to cope with these demands. The masses are demanding health services including dental services. This demand is an outgrowth of our health educational program. Educated to appreciate the value of medical care, the masses are demanding that the cost of services be brought within their means.

Various studies have indicated that there now exists a high correlation between the income status of the population and the amount of dental care received. Until recent years the lower classes did not appreciate the importance of dental care and, consequently, did not regard it as a necessity. Since the demand for dental care is new, it is not as firmly established in the budget of the lower classes as are other necessities of life. The rapid growth of participation by the federal government in the problems of social welfare is evidence of a growing recognition on the part of political leaders of the growing democratic demands among the masses for greater security.

In meeting these demands for dental care the profession must play an active part if it is to guide its own destiny. While dentistry is primarily a service profession, it has a right to expect a remuneration commensurate with its investment of time and effort. However, in the prosperous year of 1929 more than 37 per cent of the dentists received less than \$3,000 net income for the year. This low income becomes more significant when it is considered that the majority of dental patients are in the upper income brackets. Comparison of the number of physicians per 5,000 population with the income per capita in various states shows that the rate of physicians increases with increasing per capita income. This would seem to indicate

that medical services are rendered in proportion to the ability of the population to pay for care. A study of the distribution of physicians and dentists makes it clear that they have settled in larger numbers proportionately in the more populous cities where the opportunities for earning a higher income are better than is the case in smaller communities. Because of this economic consideration, it is to be questioned whether under the present methods of practice this maldistribution of services can be corrected. The professions, by their very nature, put emphasis on service rather than monetary reward. In fact, the medical professions represent a monopoly conferred by society in return for service. The recent action of the Supreme Court demonstrates that society can withdraw this privilege if society decides proper services are not being rendered.

Thus, the growing demand for dental services for the masses poses a problem which the dental profession can ill afford to ignore.

Lecture No. 2, "*The Health of the American People*"—Joseph D. Lohman, B.A., M.A., *Department of Sociology*.

In order to justify itself as a part of the world economy the modern nation must perform a specific function. The ability to perform this function depends upon the efficiency of the nation which, in turn, depends in part upon the health of its people. Now that our nation is struggling for its existence the problem of absenteeism in industry is acute. Absenteeism, a matter of individual concern in times of peace, now becomes a matter of national concern. Since most absenteeism results from illness, it follows that the security of the nation depends upon the maintenance of good health and that the health of the worker becomes of immediate concern to our government. Modern production, with its complicated assembly lines involving large numbers of workers each performing a special task, is seriously affected if one worker in the line fails to report for work. The result is that other workers in the line are forced to remain idle.

Therefore, it becomes a matter of social importance that the health of the individual be protected.

The importance of health as a factor in full employment is forcefully demonstrated by statistics which show that in the course of a year approximately 350,000,000 man days are lost due to illness. Until the health problem is solved, our industrial production will suffer a loss in efficiency. It was found at the time of our national census that 2 per cent of the total population were disabled through illness. This probably represents a total loss in productive efficiency of about 5 per cent. This takes into account only the immediate effects of illness and does not measure the more important long range effects of illness in our national economy. From the National Health Survey it was found that 28 per cent of the children who are disabled for one week or more are without benefit of doctor's care. It was further discovered that 46 per cent of the children in families having incomes of less than \$1,000 receive no doctor's care during illness lasting more than one week. These figures forcefully demonstrate the inadequacy of medical services received by certain portions of our population. It is to be noted that the neglect of the health of children produces its effect in decreased industrial efficiency in later years.

The health status of the farm families in our country is much lower than that of the urban dwellers. This difference in health level becomes of more significance when it is considered in the light of differences in the birth rate. Because of the lower birth rate in the city, the urban population is scarcely reproducing itself, whereas the rural population is more than reproducing itself. Consequently, the farm population is contributing considerably more than its share to the total population. It can be seen that the low health status of the farm group will have increasing effect upon the health of the entire nation.

The problems of population growth and decline are very complex and have

far-reaching effects on the national economy. Our falling birth rate means not only that there will be a decrease in population but also that there will be a change in the age composition of the population. Our population, in view of present trends, is an aging population. During 1935 for every 100 persons between twenty to sixty years of age there were sixty-eight persons under twenty years of age and seventeen persons over sixty years of age. It is estimated that in 1975 for every 100 persons between twenty to sixty years of age there will be only forty-eight persons under twenty years, while there will be an increase to thirty-four persons over sixty years of age. The higher proportion of aged in our population will make necessary many adjustments in our economy. It will affect our rate of industrial production, our educational program and may also be expected to affect our problems of medical care. Both the amount and types of illness will be affected by this change in age composition. Whereas great progress has been made in overcoming the diseases of childhood, little progress has been made in dealing with diseases of deterioration related to age.

Thus, it can be seen that health and welfare services will be greatly affected by these changes in the age composition of our population and that the problem of health will become increasingly a matter of concern to our total society.

Lecture No. 3, "*Dental Services and the Ability to Pay*"—Hazel Kyrk, Ph.B., Ph.D., *Department of Economics*.

The problem of providing adequate medical and dental care is a threefold one. The elements of the problem are: (1) income of the individual; (2) the medical needs of the individual; (3) ability of the individual to pay for other necessities (or supposed necessities). These are not separate problems but are closely interrelated.

In our present age we have greatly increased our production through technological development. This increased production has put us in what would appear to be a strong economic position.

However, with the increase in our productivity we have also increased our idea of what constitutes our needs. The struggle for some of our basic needs, such as foods, has been greatly eased by modern methods. Other needs, less easily obtainable, have come to be considered urgent. While goods are now produced so that they can be sold to the public more cheaply, the reduction in cost has not been at the expense of the profits of the producer. Lower prices are the result of better methods. Nevertheless, when mention is made of the possibility of lowering the cost of service in some new field, those producing the service usually become wary lest the reduction be accomplished at the expense of their own income. As in the field of production of commodities, the costs of services should be reduced by application of more efficient methods.

Our increased standard of living and increase in services received from outside agencies which formerly were provided within the family have put an increased burden on the money income of families. We have created many of our present needs through scientific advancement. Dental care offers an example. As long as men were unaware of the importance of good teeth to the general health, and before the science of dentistry had made available many of the types of restorations now in use, dental care was not included in the list of things which people considered necessary to their well-being.

In dealing with the public need for some commodities the problem could be met by limiting the consumption and thus lowering the standard of living. This solution does not meet the problem of dental needs. In the field of health our standards are and must continue to go up. There must be no reduction of standards.

People are no longer satisfied with former standards of living. They have experienced a higher standard and have no desire to return to the narrow life and hardships of past generations. This desire for a higher standard of living is not to be explained in moral terms.

Rather we must analyze the source of our ideas of what constitutes necessities. We must study the determinants of our scale of values. The movies are an outstanding example of one of the determinants of our scale of values. By depicting a life of ease and luxury the movies create in the masses the desire to emulate the lives of the fictional characters in the movies.

Much light is thrown on our scale of values when it is realized that two billion dollars are expended yearly on advertising. This expenditure represents the vast amount of effort that is expended to create in the public mind the desire for various commodities. Dentistry has spent little or nothing in a like manner in order to compete with advertised commodities for a place in the public scale of values. While advertising by individual dentists is unethical, there is no reason why the profession, as such, should not take advantage of its opportunities to make the public conscious of the value of dental care.

In our democratic society there grows up from time to time the idea that certain commodities should be available to all. At this point the need for the commodity becomes a social problem. The public attitude toward medical care illustrates this principle. The idea that things needed by one are needed by all is but a natural outgrowth of our political philosophy.

Analysis of family income and expenditure in the United States clearly demonstrates the fact that a large percentage of the population are unable to pay for adequate medical service. Analysis further shows that an even larger percentage of the population do not spend for medical care amounts large enough to provide adequate protection of health.

These facts regarding the ability of the population to pay for medical care, coupled with the recognition that medical care is a service that should be available to all, points clearly to a growing recognition that provisions for health services are a matter of public concern.

NEWS AND ANNOUNCEMENTS

DR. WILLIS J. BRAY TO BE HONORED

A testimonial dinner in honor of Dr. Willis J. Bray, immediate Past-President of the Chicago Dental Society, will be held at the Top of the Town Restaurant, 185 North Wabash Avenue, on November 30 at 6:30 p.m.

A cordial invitation is extended to all members of the Chicago Dental Society to attend this dinner. Tickets are \$5.00 a plate and may be secured from Dr. Robert I. Humphrey, 55 East Washington Street, Dearborn 6950.

MAKE YOUR HOTEL RESERVATIONS FOR 1944 MIDWINTER MEETING EARLY

Everyone planning to attend the 1944 Midwinter Meeting of the Chicago Dental Society, February 21-23 is urged to make their hotel reservations as early as possible. In Chicago, as in every other city, there is a great demand for rooms and many hotels already have accepted capacity reservations through the middle of January.

All Chicago hotels are anxious to accommodate those who plan to attend our meeting but they have asked that hotel rooms be reserved before January 15. Elsewhere in this issue you will find a list of some of the hotels in Chicago. We urge you to make *your* reservation with the hotel of your choice at the earliest possible date.

59 PER CENT OF ILLINOIS' QUOTA FILLED

Illinois has supplied only fifty-nine per cent of the quota of dental officers for the armed forces that was assigned to it at the beginning of 1943, according to information from the Procurement and Assignment Service. The original quota established was 869 and to fill that

number 355 more officers must be secured. With less than two months remaining in 1943 doubt is being expressed that Illinois will meet its obligation.

DR. WILLIAMS RESIGNS FROM STATE BOARD

Dr. W. Ira Williams has submitted his resignation from the Illinois State Board of Dental Examiners to the Department of Registration and Education. Dr. Williams has been on the Board for fifteen years, the longest in service of any of the present members. He was appointed originally by Governor Emmer-son in 1928 and has been continued as a dental examiner under three governors.

Dr. Williams was elected Supreme Grand Master of Delta Sigma Delta Fraternity at its recent business meeting in Cincinnati. In his resignation he indicates that the many duties of this office will require considerable time making it desirable for him to be relieved of his State Board position.

YOUR SHARE IN NATIONAL DEBT \$1,203.71

As of November 1 each citizen of the United States had an equal share in the public debt amounting to \$1,203.71, according to the Treasury Department monthly memorandum. That is \$47.60 more than the per capita average one month ago, \$517.35 more than one year ago, and \$953.53 higher than the peak World War I debt. This information is published before you get too far in your Christmas shopping.

WPB EASES RESTRICTIONS ON DENTAL EQUIPMENT

In a move to provide proper facilities for civilian dental care, the War Production Board, effective immediately,

considerably eased previous restrictions on the sale or shipment of dental units, chairs and miscellaneous equipment.

The action is taken in an amendment to limitation order L-249, issued January 20, 1943, which prohibited all sales and shipments of dental chairs and units to civilians in order to insure the fulfillment of Army and Navy orders for this type of equipment.

The amendment just issued permits manufacturers to ship up to eighty-eight per cent of their average yearly sales to civilians or distributors in the twelve months ending October 1, 1944. They may ship up to thirty per cent of this quota in any given quarter, but a monthly report of all sales must be filed with the WPB not later than the 10th of each month.

All restrictions on dental cuspidors, engines, bracket tables, lights, lathes and operating stools are removed by the new amendment. Shipments to Army, Navy, Maritime Commission, Lend-Lease, Canadian Military Forces, and the OEW will not be restricted by this amendment, and therefore will be ex-quota.

DR. THOMAS P. GUNNING 1882-1943

Dr. Thomas P. Gunning, state senator from the 37th district for the past thirteen years, died at a hospital in Princeton, Illinois, on November 8. He had undergone an operation in Chicago a few days previous to his death.

Dr. Gunning, who was head of the State Youth Commission, had served as chairman of the Bureau County Republican Central Committee and also as mayor of Princeton for twelve years. He first was elected to the state senate in 1930, and during Governor Green's administration was a party leader. During his entire period in the senate he led the fight against undesirable practices and sponsored the proper type of dental health legislation. His death is a great loss to organized dentistry.

DR. S. H. NANNESTAD 1878-1943

Dr. S. H. Nannestad passed away suddenly Sunday, October 31. He was born in Oslo, Norway, and came to this country at the age of nine. Later he returned to his native Norway where he studied architecture. Upon his return to the United States he took up the study of dentistry and was graduated from the Chicago College of Dental Surgery in 1904. Dr. Nannestad is survived by his widow, Martha, and three children. Lt. Fred Nannestad, now in the Army (N. U.D.S. 1933); Mrs. Robert Schmidt and Mrs. R. Sanborg.

After graduation Dr. Nannestad located at Milwaukee and California Avenues where he practiced until his death. He was an officer of the Chicago Norwegian Club for many years, a member of Humboldt Park Lodge A. F. & A. M., a Shriner, and a member of Xi Psi Phi Dental Fraternity. He was one of the founders and very active members during the early years of the Northwest Side Branch of the Chicago Dental Society.

"Nanny," as he was called by his close friends, was much beloved and esteemed not only in his own profession but also by a host of friends, all of whom will miss him greatly.—O. J. Olafsson.

INSTITUTE FILM SHOWINGS

During the months of September and October the Dental Hygiene Institute has shown its educational films before the following lay organizations: Sacred Heart Altar and Rosary Society; West Pullman Parent-Teacher Association; Agassiz Parent-Teacher Association; Daniel J. Corkery Parent-Teacher Association; Harriet Beecher Stowe Parent-Teacher Association; Woodlawn-South Shore Kiwanis Club; Barrington Elementary and High Schools; Countryside School at Barrington; St. Valentine Council, Ladies of Isabella; Michael Reese Hospital School of Nursing; Rogers Park Kiwanis Club; Nash Parent-

(Continued on page 25)

Naturally you're coming to the

**1944 MIDWINTER MEETING
of the
CHICAGO DENTAL SOCIETY**

February 21-23, 1944—Palmer House

But have you reserved your hotel room yet?

There is a great demand for rooms in Chicago and many hotels have already accepted capacity reservations through the middle of January. Be sure that a room will be ready for you when you arrive to attend our Meeting. Make your reservation with the hotel of your choice—**NOW!**

Here are a few suggestions:*

| | Minimum Rate | |
|--|---------------------|---------------------|
| | Single With Bath | Double With Bath |
| Palmer House, 15 E. Monroe St..... | \$3.85 | \$5.50 |
| Atlantic, 316 S. Clark St..... | 2.25 | 3.30 |
| Bismarck, 171 W. Randolph St..... | 3.75 | 5.25 |
| Blackstone, Michigan Ave. at Balbo Ave.... | 4.00 | 7.00 |
| Brevoort, 120 W. Madison St..... | 2.50 | 3.50 |
| Chicagoan, 67 W. Madison St..... | 2.75 | 4.40 |
| Drake, Michigan Ave. and Walton Pl..... | 4.00 | 7.00 |
| Edgewater Beach, 5349 Sheridan Rd..... | 4.40 | 6.60 |
| Harrison, 57 E. Harrison St..... | 2.00 | 3.00 |
| Knickerbocker, 163 E. Walton Pl..... | 3.50 | 5.00 |
| La Salle, Madison and La Salle Sts..... | 2.75 | 4.40 |
| Medinah Club, 505 N. Michigan Ave..... | 3.50 | 5.00 |
| Morrison, 79 W. Madison St..... | 2.75 | 4.40 |
| Sherman, 106 W. Randolph St..... | 2.75 | 4.40 |
| Shoreland, 5454 South Shore Drive..... | 5.00 | 6.00 |
| Stevens, Michigan Ave. and Balbo Drive.... | 3.50 | 5.00 |

When writing hotels for reservations be sure to mention that you are going to attend the Midwinter Meeting of the Chicago Dental Society; also state date and time of arrival and departure.

*Chicago Convention Bureau Hotels.

EDITORIAL

IS WAR'S MALNUTRITION AFFECTING TEETH?

Eleven out of every twelve Greek babies are dead before they reach their first birthday, according to information contained in the *Journal of the American Medical Association*. The usual birth weight of infants now born in certain French communities is three pounds. The cause for such appalling conditions is malnutrition, and adults as well as infants, according to what we read, are showing severe effects of food shortage.

What effect is this state of undernourishment having on the dental structures? Unfortunately, during the last war, when similar nutritional disturbances existed very few observations relating to the oral tissues were made; of course, knowledge in the field of nutrition was meager in 1918 compared to now. The only report which we recall was that by J. Sim Wallace concerning the reduction of dental caries in a London suburb simultaneous with sugar rationing. A record of the caries incidence in five year old children was made annually for several years prior to, during, and after the war. The highest rate of dental decay, thirty-five per cent, existed shortly after the war began, the lowest, twelve per cent, soon after the end of the war, and thereafter the rate increased steadily to twenty-one per cent at the time the report was made.

Dentists and the public are beset with statements about the value of this food factor, that vitamin or mineral, about unbalanced diets, excessive carbohydrate, etc. In a paper recently submitted to a dental periodical are the observations on a large group of people in India. These natives had been subjected to famine periodically and are now exposed to another. Yet, according to our information the only good thing about these people physically that the author could find was their teeth.

Does this circumstance imply that proper food is unimportant to dental health? We believe not, but it does emphasize the present opportunity to collect mass data on the significance of the various food elements on oral health, not in laboratory animals or isolated human beings, but in the populations of the occupied countries who soon may be accessible for study. Probably there will be communities where previous dental records of the individuals will be obtainable for comparative check with their present conditions.

Competent personnel should be available in the Dental and Medical Corps of the armed forces to make these studies. If not, they could be secured. The effort should be cooperative, including dentist, physician and nutritionist. The project should be organized and directed under the auspices of some body such as the National Research Council, The Council on Food and Nutrition or the American Dental Association through its Committee on International Relations in conjunction with the Army and Navy and Public Health Service.

While the urgent need will be to supply these communities with food as they are taken over, the opportunity should not be lost for observing and reporting the effect of nutritional inadequacies on the teeth. The thought of taking advantage of the existing misery of other people may not be appealing, but if the pursuit of that advantage will benefit the health of this and coming generations it should be done and will turn a measure of this war's evil into good.—*Robert G. Kesel.*

QUOTATIONS AND ABSTRACTS

The Tuberculous Dental Periapical Granuloma:—A study of 362 periapical granulomata from patients with some form of tuberculosis showed that 30 or 8 per cent were definitely tuberculous. The 30 patients investigated were selected at random; only four manifested evidence of a definite hemotogenous spread of tuberculosis.

The authors point out that if patients with healed or arrested pulmonary and other systemic tuberculous processes are permitted to leave the hospital without dental radiographic study, they may harbor these residual tuberculous infections at the root apices. One can conceive of the possibility of these foci flaring up at a subsequent time when the patient may be below par or fatigued.

Certainly, in the case of root canal therapy in a tooth involved with a periapical tuberculous granuloma, the chances of obtaining a good result without resorting to periapical surgery are not very great. If, however, it is important that the tooth be retained, root amputation with careful periapical curettage and sealing of the root canal can be performed with reasonably good results.

Brodsky, R. H. and Klatell, J. S., *Am Jnl. of Ortho. & O. S.*, 29:498 (Sept.) 1943.

Prognosis after Coronary Occlusion and Devitalized Teeth

To the Editor:—A man aged 40 had a nearly fatal anterior coronary occlusion in December. Since that time he has been making as much recovery as we think could be expected and with the exception of occasional pain and some limitation is going about his business. Some years ago three Caldwell-Luc operations were performed on his right antrum. Since that time he has had a sensory disturbance of his right upper lip and the right lower part of his nose. The internist who took care of the patient during his cardiac difficulty advised that all foci be checked and removed. Two upper teeth on the right side of his head, bicuspid and first molar, have never given any known trouble and are perfectly sound to inspection and to x-ray examination but will not give any response to vitality tests. The question which the dentist, internist and I do not feel competent to answer is Should these two teeth be extracted or should they be left in? The patient, while perfectly willing to cooperate, is not anxious to have the teeth extracted unless there is very good reason for it, since their loss would require replacement by dentures in order to leave enough teeth for chewing. How good would you judge this patient's prognosis for life? The electrocardiogram following the at-

tack showed definite changes in the chest leads. The limb leads showed no changes for several weeks and then showed a decreased amplitude of the R wave in the first lead and coving and inversion of the T waves in all leads. Since that time the limb leads have appeared normal except for some decreased amplitude. There never was any appreciable disturbance in the take-off of the ST segment in the limb leads. There was considerable such disturbance in the chest leads.

M. D., Kansas.

Answer.—Despite the fact that some residual angina pectoris is suggested by the statement in the second sentence of the query and the necessarily guarded prognosis in any case of coronary heart disease, it is possible that this man may feel perfectly well after a few more months and live for a good many years if his heart is not appreciably enlarged and if he has the usual luck and takes reasonable care of himself. His age is in his favor. The electrocardiogram, although of some importance, should not be the preponderant factor in prognosis. It is not apparent that there exists the necessity to have the teeth removed for the sake either of his heart or of his face, simply because they are devitalized, though the heart would probably stand the operative procedure.—*J.A.M.A.*, Aug. 21, 1943, Vol. 122, Page 1216.

Pregnancy and the Teeth:—The literature on the subject of dental caries relative to pregnancy is controversial. Pathologists insist there is no conclusive evidence that pregnancy can or does affect the incidence of dental caries. Clinicians, on the other hand, point out that damage done to the dental apparatus during pregnancy is sometimes appalling. Dr. Coven analyzes the various factors involved and concludes:

1. The chemical nature of the diet during pregnancy plays no role in the etiology of caries, while the physical quality may have some effect.

2. Tooth loss through periodontal lesions is perhaps a result of an altered endocrine balance.

3. An acid saliva caused by regurgitated material might be a predisposing cause of pregnancy caries as well as caries during immediate post-partum period.

4. Fear, superstition, and neglect on the part of both patient and dentist is probably the major cause of dental disease during pregnancy.

Coven, J. H., *Am. Jnl. of Ortho. & O. S.*, 29:503 (Sept.) 1943.

Bulletin of the Committee on Pharmacy and Therapeutics of the University of Illinois

X. THE USE OF CATHARTICS

Probably 95 per cent of the cathartics used in this country are employed because the patient has the delusion that two or more regular bowel movements a day are necessary for good hygiene. The wide prevalence of useless and

sometimes tragic self-administration of cathartics, however, must not blind us to the fact that these drugs are of great value in certain specific medical conditions.

INDICATIONS FOR CATHARTICS

(1) *In chronic constipation:* The popular enthusiasm for cathartics has its roots in primitive folk-psychology. In most early tribes purgation was part of a ritualistic purification. The Freudians, accordingly, are not without some justification in attributing much of our colonization to a defilement complex. The obvious connotation of the expression "colonic bath," provides good evidence in favor of this psychoanalytic interpretation.

Unfortunately, obsolete scientific theories have taken up the battle where primitive superstition left the field. Forty years ago Metchnikof created the concept of "intestinal autointoxication." "Autointoxication" provided a handy way of explaining the etiology of any disease the cause of which was not evident. Though modern research has completely demolished this theory, the idea has lost none of its charm for the lay mind. In fact, "autointoxication" and resultant "acidosis" have largely taken the place of the Personal Devil of our grandfathers as the cause of the many ills that afflict mankind.

The radio has been the most recent accomplice in the cathartic racket. During the past fifty years reputable periodicals have become increasingly loath to have their names associated with the advertising of quack medicines. A radio wavelength, however, has much less per-

sonality than a magazine or newspaper. It does not have a reputation to uphold. As a result, patent medicines now make up an immense proportion of radio advertising. One can hardly tune in on the latest bombing of the Ruhr without listening to a passionate appeal on "the importance of being regular," nor can one listen to "The Afternoon of a Faun" without three interruptions on "waking up the sluggish liver."

From the viewpoint of modern physiology the emptying of a distended colon is no less a reliable and automatic process than breathing rapidly when one has run a hundred yards. Alvarez has observed some perfectly normal and happy adults who get along with one bowel movement a week. Frisch has demonstrated that a group of children suffered no ill effects when their bowel movements were artificially slowed to an average of one in eleven days. Sampson Wright recounts the amazing case of a man who went for over a year without a bowel movement. Even at the end of that time he suffered from only a few of the symptoms commonly attributed to constipation.

When an adult who is young and intelligent enough to profit by new ideas, complains of "chronic constipation" the first thing to determine is whether he is not suffering from the delusion that two bowel movements a day are needed to protect him from such disasters as "autointoxication" or "stoppage of the bowels." A brief explanation of gastrointestinal physiology may save him from a life-

¹Manuscript submitted by Dr. F. C. Lendrum, Department of Medicine, University of Illinois College of Medicine.

long cathartic habit. He should be informed that infrequent bowel movements require no treatment unless actual physical discomfort is involved.

When one is dealing with a patient who is over the age of 40, it is ordinarily hopeless to question his faith in the saving grace of cathartics. The patient will merely "shop around" until he finds a doctor who holds orthodox opinions as revealed by the radio. Such a patient, instead, should be directed to the mildest laxative with the least objectionable side effects. The principles that govern the physician's choice will be, first, that a single chemical substance should be preferred rather than a "shot gun" mixture, and second, that the cathartic should not be irritating to the small intestine since any actual stasis occurs in the large, intestine, especially in the sigmoid.

The following are the safest cathartics for the patient obsessed with chronic constipation.

(1) Milk of magnesia, 1 ounce at bed time.

(2) Karaya gum, a heaping teaspoonful stirred in water at bed time.

(3) Bile salts, 5 grains once or twice a day.

(4) Fluid extract of Cascara Sagrada, 2 cc.

(5) Phenolphthalein, 1 to 2 grains.

(2) *Following accidental or suicidal poisoning:* In case of suicidal or accidental poisoning, as much of the poison as possible should be removed by stomach tube if the patient is seen early enough and if the poison is one which does not threaten to perforate the esophagus. (After lye, for example, a stomach tube should never be used.) The poison which has passed beyond the pylorus and cannot be removed by the stomach tube can be rapidly flushed out of the intestine if one places a full dose of a saline cathartic in the stomach before removing the tube. In the case of an early barbiturate poisoning, for example, one can leave in the stomach 1 ounce of magnesium sulphate dissolved in 12 ounces of water. This will very quickly remove the poison remaining in the in-

testinal lumen, and the patient will have a very strong chance of recovering unless a lethal dose has already been absorbed into the blood stream.

(3) *For temporary relief in painful rectal conditions:* A patient who is suffering acutely from hemorrhoids or rectal fissure will experience great relief if he is treated with combination of analgesic suppositories and a lubricant cathartic. Mineral oil is the most used of the lubricant cathartics, but it is objectionable for several reasons. If used over a long time it robs the body of the oil-soluble vitamins in the diet. Furthermore, it makes hospital bed-pans hard to keep clean. Finally, it has an unpleasant tendency to leak through an unwary anal orifice. Emulsion of liquid petrolatum is much more satisfactory. It may be given in doses of a $\frac{1}{2}$ to 1 ounce twice a day between meals.

(4) *For relief of post operative intestinal atony:* In a case of intestinal atony following operation, with distension and especially gas pains, three substances have been used hypodermically which are not ordinarily classed as cathartics but which none-the-less act powerfully upon the intestinal wall. These are surgical pituitrin, mecholyl, and prostigmine bromide. The most specific in its action is prostigmine bromide which is ordinarily administered in a dose of 1 cc. of a 1-2,000 solution. These substances are all somewhat hazardous, however. Decompression with the Wangenstein tube generally makes their use unnecessary.

(5) *For cleaning out the gastrointestinal tract in acute diarrhoea or food poisoning:* When something irritating to the intestine is taken in the diet, the gastrointestinal tract expresses its displeasure in the form of diarrhoea, cramps, and vomiting. The ideal procedure in such a condition is first to flush out the offending substance with a saline cathartic (a $\frac{1}{2}$ ounce is adequate) and thereafter to soothe the irritated bowel wall with colloidal aluminium hydroxide and possibly a small amount of opium. The central problem is to

make sure that one is dealing with an acute food poisoning and not with a beginning appendicitis or intussusception where cartharsis might be tragic.

(6) *In treatment of intestinal worms:* One general procedure governs anthelmintic treatment with many kinds of vermifuge. Treatment is ordinarily begun in the morning on an empty stomach. In many cases it is preceded by a saline cathartic (a $\frac{1}{2}$ oz. of magnesium sulphate well diluted in water). An hour later the administration of the vermifuge is begun, (for example, 3 cc. of tetrachlorethylene in a single dose for hookworm). Then, ordinarily, three hours later a second purgation with magnesium sulphate follows. Its purpose is to rid the intestines both of the dead or narcotized worms, and also to rid the intestine of the vermifuge, which itself is almost always potentially toxic. Most authorities agree in preferring the saline cathartics for use with a vermifuge, magnesium sulphate being the most used. However, sodium sulphate or sodium phosphate may be given in the same dose with equal efficiency and safety. The use of castor oil instead of salines is generally condemned (by Faust, for example) on the grounds that the castor oil makes the intestinal wall more permeable to vermifuges (which are practically all oil-soluble).

(7) *Before certain x-rays:* Cathartics are useful in removing gas from the intestinal tract before certain x-ray procedures. Gas bubbles in the large intestine are particularly troublesome in the interpretation of gall bladder x-rays, x-rays of the lumbar spine, and intravenous pyelograms. Castor oil was formerly the usual cathartic for cleaning out the large intestine. Recently, however, the saline cathartics have been increasingly used in the same dose as with the vermifuges. Theoretically, at least, the anthracene group of cathartics should be ideal for this purpose since they act specifically on the large intestine. It is unfortunate that every one of these drugs will interfere with the absorption of the gall bladder dye or disturb the function of the gall bladder sufficiently to make their use impossible in gall bladder visualization.

(8) *For removal of an impacted x-ray barium from the large intestine:* The intestinal contents ordinarily become desiccated only in the last thirty inches of the large intestine. One is not justified in causing an uproar in thirty feet of the gastrointestinal tract in order to relieve a stasis in the last thirty inches. Petrolatum or its emulsion administered from above and enemas or glycerine suppositories administered from below are generally effective.

CLASSES OF CATHARTIC DRUGS

(1) *The anthracene group:* This group includes aloes, cascara, rhubarb and senna. Their action is almost entirely on the large intestine. The anthracene cathartics unfortunately appear in numerous irritational combinations. The combination with strychnine is particularly deplorable. It has caused numerous cases of strychnine poisoning in experimentally inclined small children. The best of the group is probably fluid extract of cascara sagrada, average dose 2 cc.

(2) *The resinous cathartics:* This group includes jalap, colocynth and podophyllum. They are very irritating to

the small intestine. To paraphrase Oliver Wendell Holmes "If they were all dumped into the middle of the ocean it would be a lot better for the human race and a lot worse for the fishes."

(3) *The saline cathartics:* The saline cathartics are not absorbed through the intestinal wall and act osmotically to hold water in the intestinal lumen. They are the most rapid cathartics that can be used with safety, acting ordinarily within a half hour. Three popular members of this group have been mentioned. There are also several flavored effervescent saline cathartics if the patient feels that the pleasant taste justifies the

extra expense. Milk of magnesia, (dose $\frac{1}{2}$ to 1 ounce) belongs chemically among the saline cathartics. Its action, however, is much slower and milder. It is probably the safest "home medicine cabinet laxative"—if there has to be such a thing!

(4) *The irritant oils*: Castor oil (dose 1 oz.) is the only member of this group in the present Pharmacopoeia. In the late Fascist Italy castor oil was used as a means of punishing political prisoners—a function for which it is admirably suited. Castor oil is responsible for the terror which many children have of medicines in general. Unless it is specifically indicated one of the saline cathartics should be preferred.

(5) *The mercurials*: For many years the most important of the mercurial cathartics, calomel (dose 1 grain) owed its popularity to the belief that it stimulated the secretion of bile by the liver. Since this theory has been completely disproved, calomel is rapidly becoming a museum specimen.

(6) *Sulphur*: Irritating, offensive, and obsolete.

(7) *Phenolphthalein*: Phenolphthalein in a dose of 1 to 2 grains is easy to take and resembles the anthracene group in

its action. It is slightly inferior to cascara, however, since it may cause a very bizarre, lilac-colored skin eruption.

(8) *The lubricant cathartics*: Liquid petrolatum (mineral oil) and emulsion of liquid petrolatum are the most important members of this group. Their uses and disadvantages have already been discussed.

(9) *The bulk cathartics*: Agar agar and Karaya gum are the most important of the bulk laxatives. They are non-irritating to the intestinal tract. They are sold in granular form and are ordinarily taken in a dose of 1 heaping teaspoonful stirred in water at bed time. Karaya gum is much used by the general public under various trade names.

(10) *Bile salts*: Though the salts of the bile acids are not ordinarily classified as cathartics they have a mild laxative action. They are particularly useful for constipation-conscious, lethargic, middle-aged patients. A dose of 5 grains may be taken once or twice a day after meals and may be continued for an extended period without harm.

(11) *Injectable preparations acting directly on the intestinal wall*: This group consists chiefly of pituitrin, mecholyl, and prostigmine. They are all to be used with great caution.

NORTH SUBURBAN CLINIC DAY

(Continued from page 7)

of Mouth for Immediate Dentures, Cedric K. Dittmer; Dentistry for Children, Truman G. De Witt; Determination and Registration of Centric Relationship, Victor W. Seitz; Anatomical Specimens of Interest, Phillip Faillo. The Dental Assistants Association will sponsor two clinicians: Miss Jane Neunuebel, "Fixed Bridgework" and Miss Flo Bosworth, "Acrylics."

The scientific exhibits will be of special interest. The University of Illinois, College of Dentistry, will exhibit "An Atlas of the Mouth." This consists of a series of drawings illustrating various anatomic and physiologic aspects of the oral cavity of common interest to dentists and physicians and will be presided

over by Dr. M. Massler and Dr. I. Schour. "Oral Manifestations of Occupational Disease" will be shown by Dr. B. G. Sarnet and Dr. Schour. Northwestern University School will exhibit ten moulages depicting the primary, secondary and tertiary stages of syphilis as it involves the face and oral cavity. Dr. J. R. Schumaker, Assistant Professor of Histology, will be in charge. Finally, as a climax to this ambitious program, the Clinic Day Committee has selected as the dinner speaker a dental officer recently returned from fighting the Japs. He is Lt. Edward J. Sullivan, D.C., U.S.N., Ill. '39. Lt. Sullivan was wounded while aboard a cruiser in the Solomons and has been decorated with the Order of the Purple Heart.—James H. Keith.

NEWS OF THE BRANCHES

KENWOOD-HYDE PARK

Kenwood-Hyde Park is getting off to a good start this year. We have had two fine meetings and the program for the balance of the year is reported to be shaping up well. We'll have to take off our hats to the officers and their committees who are doing a bang up job. We can show our appreciation of their efforts by coming out to the next meeting which will be held on December 7 at the Del Prado Hotel. There will be an outstanding speaker to discuss "Acrylics," and also table clinics . . . Service News: George Englert has charge of the dental clinic at Camp Callan, San Diego, California. George says he likes the California weather and climate but will be happy to get back to Seventy-First Street again . . . Byron Flavin is located at Parris Island, South Carolina. Parris Island is a Marine and Navy base and takes in the whole island. Byron reports plenty of dental work, good hunting and fishing together with a private yacht club for the boys. We know what Byron is doing in his leisure hours . . . A. E. McKnight's son, Don, has finished the ensign course at Abbott Hall, Northwestern University, and reports to Norfolk, Virginia, for further orders.—*Mark C. Reardon, Assistant Branch Correspondent.*

NORTH SIDE

As already announced, Capt. F. F. Molt, U.S.N.R., will be the speaker at our December 6 meeting. Other Navy men will be present. Let's have a turnout that will be an inspiration. Come for dinner at 6:30 and give the Navy boys a welcome . . . With the golfing season over many will turn their attention to bowling. Some exercise is essential to "keeping fit." William Young says the Northside Bowling Club will meet at the Bowling Lanes, 5221 Broad-

way, November 17 at 1:30 p.m. Those wishing to bowl come prepared to begin the season . . . Hewet Williams gave a party at his home recently for the men in the Uptown Bank Building. Needless to say they had a grand time. Comdr. Paul Wells was among those present. Deacon Weber and Ray Cooke took advantage of his invitation to go aboard the Wolverine on Navy Day. They report a fine time. Comdr. Wells has left for active duty on an aircraft carrier . . . Julius Ferm says he spent some happy days in his summer home at Egerton, Wisconsin . . . Lt. George Haberland, who was in the city on a ten day leave, has returned to Jefferson Barracks, Missouri . . . Arthur and Mrs. Blim announce the recent marriage of their daughter, Frances, to Ensign Robert Marguerite, who is stationed at Jacksonville, Florida . . . C. W. Forsland visited his mother in Nebraska . . . Bruce Stocking who has been ill for some time is improving . . . Dr. and Mrs. Paul Brown are the happy parents of an eight pound boy, born November 3, at Wesley Memorial Hospital . . . On November 8, Harold Hillenbrand gave a talk on economics at the 78th Post Graduate meeting of the Ohio State Dental Society, Hotel Statler, Cleveland . . . Have you read Dr. Cedric Dittmer's article, *Surgical Preparation of the Mouth for Immediate Dentures*, in the November *Journal of the American Dental Association*? It is worth your while.—*Z. D. Ford, Branch Correspondent.*

NORTH SUBURBAN

The main event of Health Week at Evanston High School was the program on dental health. A group of Evanston dentists delivered their messages to the various home rooms at the school on Friday morning, October 22. In essence, the students were told the story of dental caries and the resultant effects of bac-

terial invasion on the various organs and other parts of the human body. Preventive measures were outlined briefly and the simpler prophylactic measures were stressed in a way which made them appear easy to the listeners. In conclusion, the students and school authorities were complimented for their splendid cooperation on this fine project. The talk was formulated and written by Zeke Smothers. All of the speakers owe a debt of gratitude to Zeke because his effort made theirs a lot easier. Success of this undertaking may be attributed to the hard work and close collaboration of Francis Bacon, high school principal; Leo Samuelson, director of physical education; Dr. Winston H. Tucker, Evanston health commissioner; Otto Brasmer and his committee and incidentally, the speakers. The committee members other than the chairman are: Jeff Schroeder, Willard McEwen, Bill Murray, John McGuire and Ed Ryan. The speakers were: Zeke Smothers, Jim Carter, Bill Murray, Paul Wilcox, Jim Plants, Wilson Fisher, Bob Lasater, Bill Mayer, Bill Rusch and Fred Barich. Jeff Schroeder was an alternate who didn't alternate . . . The following letter was received recently: Dear Dr. Bicuspid: Due to the exigencies of war, the W.L.B., the W.P.B., and the goddam Japs (fatherless if you prefer), we are unable to furnish the quarter pound of elastics you ordered last summer. However, we have just about perfected our new synthetic rubber, Buna S. S. Gona which promises to revolutionize the entire industry. This new product has the elasticity of steel, the toughness of a Chicago gangster and the softness of a baby's ear lobe. The manufacturing cost promises to be less than that of any other competitive product but, unfortunately, it will cost you more because you are a dentist. Until then, we are sending under separate cover and conveying by Brinks' Armored Express, three (3) single x rubber bands which have been stored in the vault at the First National, with the hope that your next three cases will be the unilateral variety. Hopefully yours, Henry

Firestone Caoutchouc, Sales Manager . . . John C. McGuire Jr., known to many as Bill, reported for duty to the Army Air Service Command at Nashville, Tennessee on November 13. He was commissioned a First Lieutenant . . . A nice letter from 1st Lt. Chester Osajda was read by Charlie Baker at a luncheon meeting. He said that the dentists were averaging 30 fillings a day. This number is the apparent standard for all army dentists. Chester is at Camp Maxey, Texas . . . Harold Noyes returned from Phelps, Wisconsin, with a nice bag of ducks and partridges. Harold doesn't recommend a skeet gun for this type of sport . . . From Camp Crook, Nebraska, 1st Lt. Hilary Marcin wrote: "This is an old army post. Old records reveal treatment for arrow and tomahawk wounds. Orders to officers: No buffalo shooting from front porches of barracks on Sunday afternoon" . . . To Englewood's R. C. Van Dam: Your accurate diagnosis has saved me fifty bucks; I was just about to consult a psychiatrist. Tanks pal . . . Clinic Day, Wednesday, November 17, is just around the corner so don't miss it.—*Frederick T. Barich, Branch Correspondent.*

NORTHWEST

The Branch feels keenly the loss of one of its founders, S. H. Nannestad, who passed away on Sunday, October 31. His son Fred, who was formerly associated with his dad, is now stationed with the Army at Columbus, Ohio . . . Sam Goodfriend's son is home on furlough. He has been transferred from Houghton, Michigan to Fort Sheridan . . . A mobile unit has been named for Ben Goldman's son, Norman, who gave his life for our country . . . Our traveling representatives Frank Biedka and Sam Klein were discussing the prospects of another convention trip the other day, this one to the Greater New York Dental Society at New York. Will they make it? See the next issue for results . . . Our travel department is a little pinched at present—it seems the boys can't get

shells, or at least enough of them. Where are all the pheasant hunters? Are they going to stay in their home state? . . . Being a member of the ethics committee of our society I am called upon many times to explain why we as individuals can not put our card in church or lodge bulletins. Along these lines let us talk about some real promotional work that is being done for us by the Dental Hygiene Institute. If you are not a member join now. Gus Tilley is having the Institute's films shown at the Ukrainian Woman's Club in the near future and Martin Juel was instrumental in having them presented before several groups.—*Folmer Nymark, Branch Correspondent.*

SOUTH SUBURBAN

South Suburban is still intact, but without a scribe at this writing. I shall try to pinch hit for Dr. Gornstein, who, it is rumored, has received his honorable discharge from the Army, but is resting in the East before returning to civilian life . . . After keeping the wires busy all morning, I learned that G. A. Stevenson flew his plane to Pecos, Texas, to visit his son, who is stationed at camp there . . . Another one of our fliers, Neil Kingston, flew to New York where he spent a week. He returned safely, but ironically, injured his foot upon his arrival home . . . Lt. O. A. Taylor Bell is stationed at Carlisle Barracks, Pennsylvania, and would appreciate some news from the boys at home . . . No one knows the whereabouts of Lt. T. J. Scanlon, but the last time he was seen, he was all bundled up in fur lined jacket and boots and seemed to be headed for Alaska . . . Capt. W. J. Walthers is still stationed at Waco, Texas, and writes that he enjoys being with the Air Corps. He has his wife and son with him . . . We did not have a November meeting, so to make up for this, we plan to have a bang up time in December. Cocktails, dinner, and a program presenting Dr. Kenneth Penhale. The date is December 7, the time, 6:30 at the Harvey Elks' Club. This should be a night for all of us to

remember and set aside for a get together. It certainly is not encouraging for a speaker to come out here and find only a handful of men in attendance, so try to bring another member with you. We guarantee that your time will be well spent and that you will have a good time.—*Daniel C. Altier, Assistant Branch Correspondent.*

WEST SIDE

Dr. Warren Willman will be the speaker at the December 14 meeting to be held at Groetchen's Restaurant, 3929 W. Madison Street. Dinner will be served at 6:30 and the meeting will start at 8 p.m. For your convenience there is free parking at the Groetchen's patrons' lot, immediately east of the restaurant . . . William R. Gubbins, our able and efficient secretary, has received his commission as a lieutenant in the U. S. Navy and awaits his call to the service . . . Irwin J. Altheim and William B. Carrane, both with the Cook County Hospital Unit at Banning, California, have been promoted to captaincies. Capt. Altheim passed through Chicago enroute to Carlisle Barricks, where he will take a six weeks course . . . Samuel H. Sherman received his captaincy recently. He is located at Carolina Beach, North Carolina, and requests us to say hello to the boys for him . . . Lt. Edmund W. Sherry is located at Drew Field, Tampa, Florida, and would like to hear from his friends back home . . . Capt. Arthur I. Jirka has been transferred from Camp MacKall to Camp Davis, North Carolina . . . Lt. Ben Z. Kite of the U. S. Navy was called to the service on November 14. He reported at Mare Island, California . . . Lt. Ben Solomon is located at Jefferson Barracks, Missouri . . . Capt. James A. Butler has returned to active service and is stationed at Station Hospital, Camp Chaffee, Arkansas . . . Leonard Boke, Walter M. Karr and Henry W. Stecker have entered the Army service during recent months . . . R. A. Haebich and William Hejna are entering the Navy

soon . . . Nathan Addis, Assistant Branch Correspondent, expects his commission from the Navy Department in the near future . . . We are sorry to learn that Bohuslav Siml suffered a severe illness and has retired from practice . . . Chester P. Bellan is returning from Bremerton, Washington, where he has been practicing during recent months . . . Sebastian Capinegro has moved his office to a North side location . . . William A. Semarak is now located in Cicero . . . Two of our most constant members at the monthly dinners, Henry C. Lee and Fred E. Porath, were absent in October. The breach was extremely noticeable and the boys are hoping to see their smiling faces across the table once more . . . The Dental Hygiene Institute's program is a long term undertaking with a view toward teaching the public the value of regular and constant care of the teeth, hoping to increase our practice in the lean years that are to come and unselfishly contributing to the health of our respective communities. Your membership is earnestly solicited and will be greatly appreciated. Let us put the West Side over one hundred per cent.—*George F. Vogt, Branch Correspondent.*

WEST SUBURBAN

Just a reminder: There will be a meeting of West Suburban on December 7. The speaker will be Dr. Robert Blackwell, head of the Operative Department of Northwestern University Dental School. "Operative Dentistry as the Foundation of Dentistry" is to be his subject. Try to buy your dinner tickets in advance from a member of the ticket committee as we must be able to give a close estimate for the number of meals to be served . . . On October 27 there was a golden anniversary. William "Bill" Fellman was the object of this celebration which was a surprise party in the private dining room of Rowe's Restaurant. Appropriate remarks were made by Walter Edlund and a lounging robe and tie and scarf set were given to Dr. Fellman by the guests gathered to commemorate the completion of fifty years

in dental practice. Among the guests were: C. F. Rockey, P. A. Betty, F. E. Gillespie, B. D. Barber, I. B. Clendenen, A. J. La Grow, W. K. Frakes, L. F. Hein, R. Hinrichs, E. W. Edlund, and F. S. Tittle who arranged the whole party . . . Arno Brett has just returned from Greencastle, Indiana, after establishing his daughter as a freshman at De Pauw . . . Jim McCoy is now in the army at Houston, Texas . . . Ted Mosetick reported to the army November 8 . . . Joe Komarek writes from the Station Hospital at Jefferson Barracks, Missouri, these days . . . Winfield Scott painted such a fine picture of hunting in luxury in South Dakota that Clarence Hansen has gone out there now to see if it is true. It seems that Winfield found a local fellow who uses a 1931 Chevie as a jeep and drives it anywhere. With a good dog to retrieve the game, wear and tear on the hunter is held to a minimum . . . L. W. McNamara is back in circulation after a siege of ear trouble . . . Don't forget to collect your cigars from Dick Anderson who became the father of a daughter on October 22.—*Karl von der Heydt, Branch Correspondent.*

ENGLEWOOD

Dr. M. W. Case certainly gets around. He and a friend and former classmate who practices dentistry in Washington, D. C., fished in Chesapeake Bay this past summer. He has also fished the waters of Long Island Sound . . . An Englewoodian of extraction fame is good old Charlie Hillier. Charlie still loves his little cottage "Daown in Indianny" where he can sit on the front porch and see the golfers building muscles and storing up energy so they can play another round of golf. He says, "I don't seem to care about golf as much as I used to." He and Dick Keyser used to "knock 'em dead" on a golf course . . . It was good to see Eddie Eck at the golf outing. He shot 104 which wasn't bad for the first time out in fifteen years . . . Clyde Suddarth has the right idea. He spends most of his spare time at his

Indiana farm. Sud has sort of deserted the South Side . . . Jerome Robbins took the Indiana Board. He hasn't heard the result but we wish him luck anyway . . . The following note was received from Lt. E. L. Hoyne who is stationed at Jefferson Barracks, Missouri: "Have been here since the 23rd of September and like it very much. A lot of work and a lot of men badly in need of dental care. Food is grand—steaks, fresh fruit and vegetables, butter, coffee, ice cream and the best of everything in general" . . .

Ken Sharp was called into the service along in June. He was sent to New Orleans and after a month or so came home on furlough to see the new little Sharpshooter in his home. Although we were having one of our hot weather spells Ken said Chicago was cool compared to New Orleans . . . And so it goes. Most of the boys are working hard and beginning to put in more night hours, which is a bad idea unless it is done to further the war effort.—*Frank Hospers, Ass't Branch Correspondent.*

MIDWINTER MEETING

(Continued from page 6)

Oral Surgery program and Le Roy R. Main, of St. Louis, a roentgenologist of note, has sent in his acceptance. Such old favorites as William J. Charters, of Des Moines, W. B. Amy of Toronto, the Nebraska Study Club, Ralph R. Christy of Denver, George Hollenback of Los Angeles and W. H. Crawford of Indianapolis will be giving repeat performances. The General Clinics Division expects to make an outstanding contribution. Captain Tartre of Great Lakes

has promised to send a corps of clinicians from his post, each one of whom was outstanding in his special field when in civilian practice. These men will appear on Tuesday afternoon of the meeting as part of the Army and Navy Day Program. On Wednesday the three Chicago schools will present group clinics featuring advanced students under the supervision of a faculty member. These Clinics will cover all phases of dentistry and will be so synchronized that visitors will be able to follow a given technic from start to finish.—*James H. Keith.*

NEWS AND ANNOUNCEMENTS

(Continued from page 13)

Teacher Association; Yates School Parent-Teacher Association; St. Andrews Mothers Club; St. Thomas the Apostle Parents Club; Elmwood Park Parent-Teacher Association; Girl Scout Troop at Oak Park Methodist Church; Greenwood Parent-Teacher Association at Blue Island; Morrill Parent-Teacher Association; Eberhart Parent-Teacher Association; Fort Dearborn School Parent-Teacher Association; Peterson Parent-Teacher Association; Paul Revere Parent-Teacher Association at Blue Island;

Sears, Roebuck employees; Lutheran School, Desplaines; Riverview Country School, Desplaines; St. Mary's School, Desplaines; Locke Parent-Teacher Association; Roosevelt Parent-Teacher Association at Ivanhoe; North Austin Lutheran Church Dorcas Society; Council of Catholic Women; Skokie Rotary Club; Elmwood Parent-Teacher Association at Zion; Roosevelt Parent-Teacher Association at Elmhurst; Cicero Kiwanis Club; Irving School; Mary Lyon Parent-Teacher Association.

Total attendance for the two months was 4,416.

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Manuscripts and news items of interest to the membership of the Society are solicited.

Forms close on the fifth and twentieth of each month. The early submission of material will insure more consideration for publication.

Ethics Committee

Chester C. Blakeley, Chairman 1944
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Applications for Membership

The following applications have been received by the Board of Censors. Any member having information relative to any of the applicants, which would affect their membership, should communicate in writing with Dr. Chester G. Blakeley, 7058 S. Euclid Avenue. Anonymous communications or telephone calls will receive no consideration.

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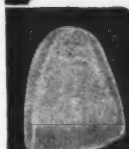
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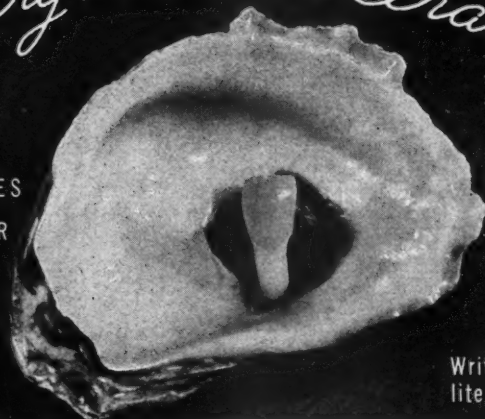
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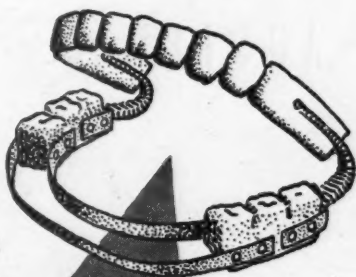
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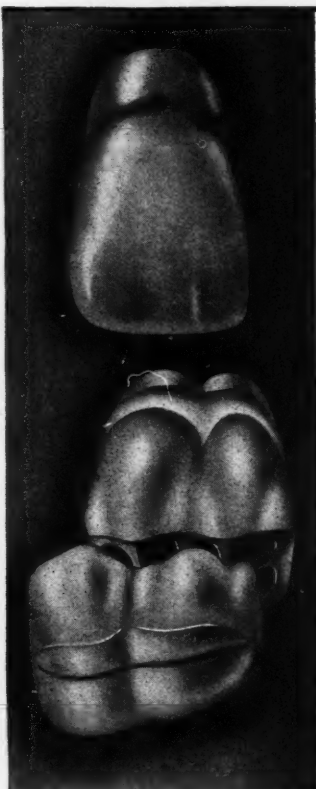
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